

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Penguin PAC

ADDRESS (number and street)

PO Box 83142

☐Check if different
than previously
reported. (ACC)

Gaithersburg

MD

20883

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00417584

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2009

through

12

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Allen Ryan

Signature of Treasurer

Electronically Filed by Allen Ryan

Date

01

29

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 22

Write or Type Committee Name
Penguin PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	134.41
(b) Cash on Hand at Beginning of Reporting Period	2919.87	
(c) Total Receipts (from Line 19)	46200.00	56200.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	49119.87	56334.41
7. Total Disbursements (from Line 31)	46951.95	54166.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2167.92	2167.92
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Penguin PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
1	2	0	3	1	2	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	30500.00	30500.00
(ii) Unitemized	200.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	30700.00	30700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	15500.00	25500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	46200.00	56200.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	46200.00	56200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	46200.00	56200.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	10451.95	12666.49	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	10451.95	12666.49	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26500.00	31500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	10000.00	10000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	46951.95	54166.49	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46951.95	54166.49	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	46200.00	56200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46200.00	56200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10451.95	12666.49
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10451.95	12666.49

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Penguin PAC

A.

Full Name (Last, First, Middle Initial)

Becky Alexander

Mailing Address 2936 Ironwood Dr

City

Akron

State

OH

Zip Code

44312-5809

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 0 9

Transaction ID: C5551964

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Emeline Boich

Mailing Address 41 S High St
Ste 3750

City

Columbus

State

OH

Zip Code

43215-3441

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: C5582880

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Wayne Boich, Sr.

Mailing Address 41 S High St
Ste 3750

City

Columbus

State

OH

Zip Code

43215-3441

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boich Companies

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: C5582881

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Penguin PAC

A.

Full Name (Last, First, Middle Initial)

Wayne Michael Boich, Jr.

Mailing Address 450 Alton Rd
Ph 2

City	State	Zip Code
Miami Beach	FL	33139-6776

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boich CompaniesOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	9

Transaction ID: C5582882

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Michael G. Morris

Mailing Address 1 Riverside Plaza

City	State	Zip Code
Columbus	OH	43215

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Electric PowerOccupation
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	0	9

Transaction ID: C5552945

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Robert P. Powers

Mailing Address 749 Woods Hollow Ln

City	State	Zip Code
Powell	OH	43065-8752

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Electric PowerOccupation
President, AEP Utilities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	0	9

Transaction ID: C5551961

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Penguin PAC

A.

Full Name (Last, First, Middle Initial)

Karen Sovell

Mailing Address 41 S High St
Ste 3750

City State Zip Code
Columbus OH 43215-6161

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/a

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: C5582883

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Max Sovell

Mailing Address 41 S High St
Ste 3750

City State Zip Code
Columbus OH 43215-6161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boich Co.

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: C5582884

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Dennis E. Welch

Mailing Address 7714 Ogden Woods Blvd.

City State Zip Code
New Albany OH 43054

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Electric Power

Occupation
Exec VP, Environment, Safety, Health R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 0 9

Transaction ID: C5551960

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Penguin PAC

A.

Full Name (Last, First, Middle Initial)

Charles E. Zebula

Mailing Address 5210 River Forest Rd

City

Dublin

State

OH

Zip Code

43017-8689

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Electric Power

Occupation

Treasurer & SVP-Investor Relations

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	9	

Transaction ID: C5551963

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

30500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 22

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Penguin PAC

A.

Full Name (Last, First, Middle Initial)

AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMI

Mailing Address 1111 14th Street, NW
Suite 1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: C5606783

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EM

Mailing Address 1625 L STREET NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00011114

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 9

Transaction ID: C5610242

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

FIRSTENERGY POLITICAL ACTION COMMITTEE

Mailing Address 76 South Main Street

City State Zip Code
Akron OH 44308

FEC ID number of contributing
federal political committee.

C C00140855

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 0 9

Transaction ID: C5551965

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 22

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Penguin PAC

A.Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL AMailing Address 1550 Crystal Drive
Suite 300City State Zip Code
Arlington VA 22202FEC ID number of contributing
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	0	9

Transaction ID: C5591155

Amount of Each Receipt this Period

2500.00

B.Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POL LEAGUE OF THE INT'L AS

Mailing Address 9000 Machinists Place

City State Zip Code
Upper Marlboro MD 20772FEC ID number of contributing
federal political committee.**C** C00002469

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	9

Transaction ID: C5586767

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

15500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A.

Full Name (Last, First, Middle Initial)
Art & Soul

Mailing Address 415 New Jersey Avenue

City Washington State DC Zip Code 20001

Purpose of Disbursement
Fundraising/Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D314626

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

1509.77

Not for federal candidate

B.

Full Name (Last, First, Middle Initial)
Fraiori & Associates

Mailing Address 80 F St NW
Ste 804

City Washington State DC Zip Code 20001-1528

Purpose of Disbursement
Generic fundraising consulting fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315026

Date of Disbursement

08 / 25 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Fraiori & Associates

Mailing Address 80 F St NW
Ste 804

City Washington State DC Zip Code 20001-1528

Purpose of Disbursement
Generic fundraising consulting fee & expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D316370

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

285.88

SUBTOTAL of Disbursements This Page (optional)

2295.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Fraiori & Associates</p> <p>Mailing Address 80 F St NW Ste 804</p> <p>City Washington State DC Zip Code 20001-1528</p> <p>Purpose of Disbursement Generic fundraising consulting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D319884</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Fraiori & Associates</p> <p>Mailing Address 80 F St NW Ste 804</p> <p>City Washington State DC Zip Code 20001-1528</p> <p>Purpose of Disbursement Generic fundraising consulting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324001</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Fraiori & Associates</p> <p>Mailing Address 80 F St NW Ste 804</p> <p>City Washington State DC Zip Code 20001-1528</p> <p>Purpose of Disbursement Generic fundraising consulting fee & expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324004</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 306.67</p>

SUBTOTAL of Disbursements This Page (optional)

806.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A. Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D315302																				
Mailing Address 1225 Eye Street, NW Suite 1225	Date of Disbursement																				
City Washington State DC Zip Code 20005	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	0	9												
Purpose of Disbursement Software	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Tim Ryan	Transaction ID: D315602																				
Mailing Address 1504 Taft Ave	Date of Disbursement																				
City Niles State OH Zip Code 44446-3832	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	8		2	0	0	9												
Purpose of Disbursement Fundraising event expenses (see below)	Amount of Each Disbursement this Period																				
Candidate Name Timothy J Ryan	<table border="1"> <tr> <td colspan="10">7029.49</td> </tr> </table>	7029.49																			
7029.49																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: OH District: 17	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: D315603																				
Mailing Address PO Box 4607	Date of Disbursement																				
City Houston State TX Zip Code 77210-4607	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	8		2	0	0	9												
Purpose of Disbursement Travel/Airfare	Amount of Each Disbursement this Period																				
Candidate Name	<table border="1"> <tr> <td colspan="10">1553.40</td> </tr> </table>	1553.40																			
1553.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	Category/ Type																				

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

7329.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A. Full Name (Last, First, Middle Initial) Enterprise Rent A Car Mailing Address 310 W. Wisconsin Avenue	Transaction ID: D315606 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 8 / 2 0 0 9</div> </div>
City Milwaukee State WI Zip Code 53203 Purpose of Disbursement Travel/Car rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>327.46</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Inn on Woodlake Mailing Address 705 Woodlake Road City Kohler State WI Zip Code 53044 Purpose of Disbursement Generic fundraising/catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D315604 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 8 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>3579.43</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Inn on Woodlake Mailing Address 705 Woodlake Road City Kohler State WI Zip Code 53044 Purpose of Disbursement Travel/Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D315605 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 8 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>219.50</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A.

Full Name (Last, First, Middle Initial)

Whistling Straits

Mailing Address 705 Woodlake Road

City State Zip Code
Kohler WI 53044

Purpose of Disbursement
Generic fundraising event expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315607

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A. Full Name (Last, First, Middle Initial) Capuano for Senate	Transaction ID: D318434 Date of Disbursement
Mailing Address 172 Central St	<div> <div>10</div> <div>09</div> <div>2009</div> </div>
City Somerville State MA Zip Code 02145-2741	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Michael E. Capuano Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 00 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	<div>2500.00</div>
B. Full Name (Last, First, Middle Initial) Capuano for Senate	Transaction ID: D318435 Date of Disbursement
Mailing Address 172 Central St	<div> <div>10</div> <div>15</div> <div>2009</div> </div>
City Somerville State MA Zip Code 02145-2741	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Michael E. Capuano Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 00 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	<div>2500.00</div>
C. Full Name (Last, First, Middle Initial) DRIEHAUS FOR CONGRESS	Transaction ID: D315805 Date of Disbursement
Mailing Address 650 Fox Trails Way	<div> <div>09</div> <div>18</div> <div>2009</div> </div>
City Cincinnati State OH Zip Code 45233	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Steven Driehaus Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>2500.00</div>

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A. Full Name (Last, First, Middle Initial) FISHER FOR OHIO	Transaction ID: D324003 Date of Disbursement
Mailing Address 32125 SOLON ROAD	<input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City SOLON State OH Zip Code 44139	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
Candidate Name Lee Irwin Fisher	<input type="text"/> Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE	Transaction ID: D318758 Date of Disbursement
Mailing Address P.O. Box A	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Harrisonville State MO Zip Code 64701	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
Candidate Name Ike Skelton	<input type="text"/> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BOCCIERI FOR CONGRESS	Transaction ID: D315806 Date of Disbursement
Mailing Address PO Box 3016	<input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>
City Alliance State OH Zip Code 44601	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
Candidate Name John Bocchieri	<input type="text"/> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A.

Full Name (Last, First, Middle Initial)
KENDRICK MEEK FOR FLORIDA

Mailing Address 111 NW 183RD STREET SUITE 325

City State Zip Code
MIAMI FL 33169

Purpose of Disbursement
Contribution

Candidate Name
KENDRICK MEEK CAMPAIGN FOR CONGRESS

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: FL District: 00

Transaction ID: D320561

Date of Disbursement

12 / 15 / 2009

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
KILROY FOR CONGRESS

Mailing Address 929 Harrison Ave
Ste 305

City State Zip Code
Columbus OH 43215

Purpose of Disbursement
Debt Retirement

Candidate Name
Mary Jo Kilroy

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify) ▼

State: OH District: 15

Transaction ID: D324002

Date of Disbursement

09 / 05 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Raj for Kansas

Mailing Address PO Box 780971

City State Zip Code
Wichita KS 67278

Purpose of Disbursement
Contribution

Candidate Name
Raj Kansas

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼

State: KS District: 04

Transaction ID: D315901

Date of Disbursement

09 / 24 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A.

Full Name (Last, First, Middle Initial)

ZACK SPACE FOR CONGRESS COMMITTEE

Mailing Address 726 Sixteenth Street NE

City State Zip Code
Massillon OH 44646

Purpose of Disbursement
Contribution

Candidate Name
Mr. Zack Space

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 18

Transaction ID: D318433

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

26500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A. Full Name (Last, First, Middle Initial)
Friends of Joe Schiavoni for State Senate

Mailing Address 87 Westchester Dr.

City Youngstown State OH Zip Code 44515-3902

Purpose of Disbursement
Non-Federal Contribution

Candidate Name
Friends of Joe Schiavoni for State Senate

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D320553

Date of Disbursement

12 / 15 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Friends of Lou Gentile

Mailing Address 500 Luray Drive

City Wintersville State OH Zip Code 43953

Purpose of Disbursement
Non-Federal Contribution

Candidate Name
Friends of Lou Gentile

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D320562

Date of Disbursement

12 / 15 / 2009

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Mahoning County Democratic Party

Mailing Address 103 E Boardman St

City Youngstown State OH Zip Code 44503-1828

Purpose of Disbursement
Non-Federal Contribution

Candidate Name
Mahoning County Democratic Party

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315781

Date of Disbursement

09 / 17 / 2009

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Penguin PAC

A.

Full Name (Last, First, Middle Initial)
Ohio House Democratic Caucus

Mailing Address 340 E Fulton St

City State Zip Code
Columbus OH 43215-5418Purpose of Disbursement
Non-Federal ContributionCandidate Name
Ohio House Democratic CaucusCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D318436

Date of Disbursement

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

10000.00